Form BCW-2-MT	**Transmittal of Information Returns** **CD or Diskette Reporting for Tax Year 2010**	INCOME TAX DIV CITY OF BATTLE CREEK MICHIGAN

1. Type of files represented by this transmittal

❑ ORIGINAL   ❑ Correction   ❑ Replacement

2. Tax Year

3. Name and address of payer *(include street, city, state, and ZIP code)*

4. Name and address of organization transmitting *(include street, city, state, and ZIP code)*

5. Name and address of persons to contact about magnetic media files *(include street, city, state, and ZIP code)*

5a. Title

5b. Telephone number *(include area code)*

6a. Employer identification *number of payer*

6b. Employer identification *number of transmitter*

Recording Information

Type of Media: ❑ CD
❑ 3.5" Diskette
❑ E-mail ASCII Text - For Files With 1000 or Fewer Records

Number of CDs or Diskettes _____
City Tax Withheld _____
Number of Payees _____

Affidavit

Under penalties of perjury, I declare that I have examined this transmittal, including accompanying documents, and to the best of my knowledge and belief it is correct and complete. In the case of documents without recipient's identifying numbers, I have complied with the requirements of the law in attempting to secure such numbers from the recipients.

Signature _____ Title _____ Date _____

MEDIA REPORTING

If you more than 100 Forms W-2, we would prefer you to file them on CD or Diskette. You may be charged a penalty if you fail to file when required. ***NOTE: You are encouraged to file** *on CD or Diskette even though you are filing fewer than 100 Forms W-2.*

SPECIAL INSTRUCTIONS

- The City of Battle Creek requires all CD or Diskette files to contain Record Types RE, RW, RS, RT, and RF.
- Additional record types will be ignored.
- Records should contain data as defined by the 2010 MMREF-1 specifications.
- City of Battle Creek specific information:

RW RECORD			RS RECORD		
Positions	Data	Field Length	Position	Data	Field Length
3	SSN	9	5	Local Entity	5 (use BTLCK)
12	First Name	15	309	Federal Wages	11
27	Middle Initial	15	320	Local Withholding	11
42	Last Name	20			
88	Address	22			
110	City	22			
132	State	2			
134	Zip Code	5			
139	Plus 4	4			

VIA US MAIL
BATTLE CREEK INCOME TAX
P O BOX 1657
BATTLE CREEK, MI 49016-1657

VIA UPS OR OTHER
BATTLE CREEK INCOME TAX
10 DIVISION STREET N
BATTLE CREEK, MI 49014

VIA E-MAIL
SEND ASCII TEXT FILES OR
QUESTIONS:
BCIncometax@ci.battle-creek.mi.us

Local entity codes - Use the following entity codes for Michigan cities.

Albion	ALB	Highland Park	HP	Pontiac	PNT
Battle Creek	BC	Hudson	HUD	Port Huron	PH
Big Rapids	BR	Ionia	ION	Portland	POR
Detroit	DET	Jackson	JAC	Saginaw	SAG
Flint	FL	Lansing	LAN	Springfiled	SPR
Grand Rapids	GR	Lapeer	LAP	Walker	WALK
Grayling	GRA	Muskegon	MKG		
Hamtramck	HAM	Muskegon Heights	MH		

City Tax Proprietary

This is a comma-delimited format. That means each field is separated by a comma. See below for instructions on creating this file from microsoft Excel. All text must be in upper case. If leading zeros on TaxIds or Zip codes do not show, this is all right.

First Line: Employer

A. CTE	Text exactly as shown
B. Employer FEIN or TaxID	9 digits no spaces or punctuation
C. Tax Year	4 digits
D. Employer Name	
E. Corporation	C if corporation, blank otherwise
F. Employer street address	No commas
G. Employer City	
H. Employer State	2 characters
I Employer Zipcode	5 digits (or 6 characters if foreign country)
J. Employer Plus4	4 digits

Remaining Lines: One per Employee

A. CTW	Text exactly as shown
B Employee SSN	9 digits no spaces or punctuation
C. Employee Last Name	
D. Employee First Name	
E. Employee Middle Name	
F. Employee Street Address	no commas
G. Employee City	
H. Employee State	2 characters
I. Employee Zipcode	5 digits (or 6 if foreign country)
J. Employee Plus4	4 digits
K. Wages	box 1
L. Local Entity Code	See table above
M. Local Withholding	Entered as normal # with decimal point
N. Social Security Wages	Box 3
O. Medicare Wages	Box 5
P. Local Wages	Box 18
Q. Total Deferred	Included in Box 12

How to create CPT formatting using Microsoft Excel

Note: All dollar amounts should be entered as normal number with decimal point, such as 15100.50

1. Open a new spreadsheet.
2. On the first line, enter the Employer data as specified above, entering one value per column . The letter shown at the start of each line must match the letter at the top of the column in Excel. Skip the column if blank. Insure all entries are upper case. To start, enter "CTE" in the first column.
3. For each employer, enter another line, entering CTE in the first column (A) and entering one field per column.
4. Click on the save button (or select Save from the file menu). At the bottom is a drop down box for save as type. Click on the drop-down and select "CSV (Comma Delimited)(*.cvs)" then enter a file name and click save.
5. Copy this file to a diskette or compact disc and send to the income tax office.

Submitting W2s Electronically
Federal Filing format - EFW2
Information about the Federal EFW2 format is available on the Social Security Administration website at: www.ssa.gov/employer

Note that the record with local information is not required for filing federally. The IRS record must be included to provide city information.

City Tax Proprietary format (CTP)
This is a simple for mat for a single employer. It may be created using Microsoft Excel. It is a Comma Delimited format. Details are on a later page.

The following table lists critical fields, with the location in that format.

Format Type		EFW2	CTP
Local Entity Code	Record	RS	CTW
	Start Position	5	12
	Length	5	--
	Value	{{Entity}}	{{Entity}}
Local withholding	Record	RS	CTW
	Start Position	320	13
	Length	11	--
Local Taxable	Record	RS	CTW
	Start Position	309	11
	Length	11	--

Updated 11/2010